

# PART B - FEE(S) TRANSMITTAL

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28815 7590 06/01/2010

**Zilka-Kotab, PC**  
**P.O. BOX 721120**  
**SAN JOSE, CA 95172-1120**

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(Depositor name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY Docket NO.	CONFIRMATION NO.
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09/04/2007

08/26/2001

Umair A. Khan

NVIDIP371P002178

7341

**TITLE OF INVENTION:** SYSTEM, METHOD AND COMPUTER PROGRAM PRODUCT FOR THE RECORDING AND PLAYBACK OF TRANSACTION MACROS

APPL. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL DUES DUE	DATE DUE
nonprovisional	<del>YES</del> NO	<del>\$1510</del> \$1510	\$300	\$0	<del>\$1810</del> \$1810	09/01/2010

EXAMINER	ART UNIT	CLASS/SUBCLASS
MURDOUGH, JOSHUA A	3621	75-BS-1000

1. Change of correspondence address or indication of "Free Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB-112) attached.

☐ "Free Address" indication (or "Free Address" Indication form PTO/A-7, Rev. 03-02 or most recent) attached. Use of a **Customer Number** is required.

2. For printing on the patent front page, list:

(1) the names of up to 3 registered patent attorneys or agents (or, alternatively,

(2) the name of a single firm having as a member a registered attorney or agent and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

(3) \_\_\_\_\_

1. **Zilka-Kotab, PC**

2. \_\_\_\_\_

3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY and STATE OR COUNTRY)

**NVIDIA International, Inc.**

**St. Michael, Barbados**

Please check the appropriate assignee category or categories (will not be printed on the patent):

☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies \_\_\_\_\_

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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number **50-1351**. (enclose a true copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☒ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

(Order No. NVIDP371)

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Authorized Signature **/KEVINZILKA/**

Date **August 31, 2010**

Typed or printed name **Kevin J. Zilka**

Registration No. **41,429**

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